## CHICKASAW COUNTY RESCUE SQUAD

P.O. Box 214 New Hampton, Iowa 50659

## APPLICATION FOR MEMBERSHIP

PERSONAL INFORMATION							
				Date	:		
Name:			Divers License #				
Last	First		Middle				
Address:							
Street		City		State		Zip	
Phone Number:		Date of Bi	Date of Birth:				
Have you ever applied with the	e Chickasaw C	ounty Reso	ue Squad b	efore?			
If Yes, when?							
Have you ever applied with an County? If Yes, when and what			al Service o	r Fire Depa	artment in Ch	nickasaw	
Date you can start:						ii .	
Current Employer:	ar.		Allowed to	respond fr	om work?:		
Referred By:							
EMEDORNOV MEDIOAI1/	on DESCUE T	D A INIINIC					
EMERGENCY MEDICAL and/	of RESCUE I	RAINING					
Title Name and Location	of Training		Year Comp	oleted	Year of Exp	iration	
					ar.		
				9			
				13			

GENERAL							
Subject(s) of special study or research work:							
Special skills or trades	:						
Hobbies and activities:							
Military Service:		Rank:					
<b>REFERENCES:</b> Names of persons, not related to you, whom you have known for at least one year.							
Name	Address	Phone Number	Years Acquainted				
1							
2							
3							
MEDICL HISTORY							
Known Allergies: Doctor:							
Medical conditions that we need to be aware of that might prevent you from preforming duties as a Rescue Squad member:							
QUESTIONAIRE							
Have you ever been convicted of a Felony?							
Has your EMS license ever been suspended or revoked?							
If Yes explain:							
I certify that all the information provided to be truthful and complete statement of the facts with the understanding that if found false, it may prevent my being a member or may cause dismissal once becoming a member. I authorize the Rescue Squad to investigate my previous experience and quailfications.  I hereby acknowledge that I have read this application in its entirety, and understand that this application is not a contract of membership and that any individual who becomes a member may voluntarilly leave membership or be terminated at any time by the Rescue Squad Director and Crew Chief.							
Signature		Date					